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# The Overdose Crisis In Central Florida:

*A Critical Analysis of Recent Trends  
and Recommendations for  
Sustaining Effective Interventions*

*Working to solve Central Florida's overdose crisis, one  
person, one leader, one community at a time*

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## ABOUT PROJECT OPIOID CENTRAL FLORIDA

Project Opioid is a nonprofit organization dedicated to empowering communities in their efforts to reduce opioid-related deaths. We achieve this specific purpose by working directly with motivated leaders, providing them with the information, the guidance, and the tools that they need to confront the overdose crisis within their spheres of influence.

Using our own proven model of coalition building, we help leaders construct unified groups of diverse individuals who work together to achieve a common goal: the reduction of opioid-related deaths in the communities where they live and work.

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## INTRODUCTION

The opioid crisis is far from over; in fact, it has escalated to alarming proportions. Despite numerous interventions and policy measures, overdose deaths in the United States have risen consecutively for the past four years, reaching a harrowing peak in 2022. As we move further into the post-pandemic world, we are left grappling with this multifaceted public health emergency that shows few signs of abating.

In the face of these grim statistics, this report aims to delve into the current state of the opioid crisis, with a special focus on Florida and its Central Florida communities. We seek to address the following urgent questions:

- **What factors are contributing to the consistent rise in overdose deaths nationally?**
- **Given that fentanyl continues to be a significant driver, how can its distribution and consumption be curbed effectively?**
- **What is the extent of opioid-related deaths among younger Americans, and what specialized interventions can be implemented for this demographic?**
- **How can medications like naloxone and buprenorphine be more widely deployed to save lives, and what are the challenges in scaling up these efforts?**
- **Are there unique trends or interventions in Florida that can offer insights into tackling this crisis more effectively?**



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Drawing from a rich array of data sources including governmental reports and peer-reviewed academic studies, this report aims to offer actionable insights and recommendations. The ultimate goal is to guide policymakers, healthcare professionals, and community leaders in evolving our strategies to combat this enduring and complex crisis more effectively.

## METHODOLOGY

Accurate data is crucial for understanding the evolving nature of the opioid epidemic in Florida. Given that available datasets from various agencies don't always perfectly align, multiple sources were consulted to capture the broader trends:

- **Centers for Disease Control (CDC): Utilizes the Vital Statistics Reporting System to report overdose deaths based on death certificates for 12-month periods. Data is categorized by the decedent's county of residence and the month of death.**
- **Florida Department of Law Enforcement (FDLE) Medical Examiners Commission: Provides detailed reports on overdose deaths, covering all 25 districts in Florida. These reports include demographic information and toxicology results.**

The study also relied on peer-reviewed articles, academic databases, research reports, and news articles for additional insights.



## ACKNOWLEDGEMENT:

*From overdoses to unintentional poisonings: A reassessment of fentanyl-related deaths.*

The understanding of fentanyl-related fatalities is undergoing a pivotal shift. The conventional perception of these incidents as simple overdoses is giving way to a more nuanced perspective, considering these deaths in most cases as instances of unintentional poisoning. The implications of this transformation are profound, influencing both prevention strategies and drug policy formulation.

Fentanyl, a synthetic opioid of extraordinary potency—50 times more powerful than heroin and 100 times stronger than morphine[1]—has become a stealthy killer. Its incorporation into other drugs, such as heroin, cocaine, methamphetamine, or counterfeit prescription pills, often occurs without users' knowledge. Given the minute quantity of fentanyl required to cause death—comparable in weight to a snowflake—users can unknowingly ingest lethal doses. Surveys consistently demonstrate that a significant number of users test positive for fentanyl despite having neither intentionally consumed it nor wished to do so.[2]

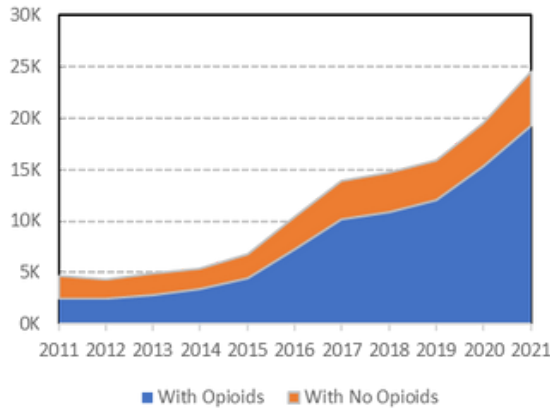
[1] <https://www.dea.gov/factsheets/fentanyl>

[2] <https://www.nyu.edu/about/news-publications/news/2023/may/fentanyl-new-york-city.html>

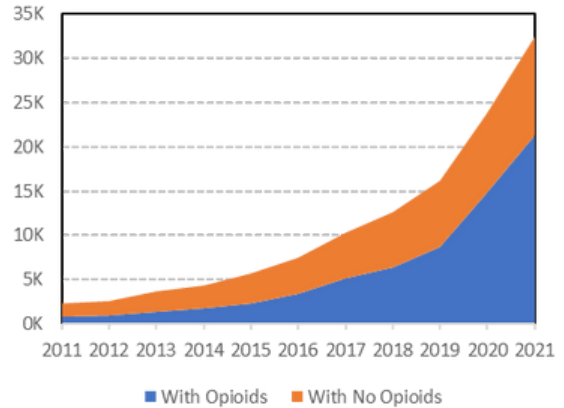




Overdose Deaths  
Involving Cocaine



Overdose Deaths  
Involving Psychostimulants



Source: National Vital Statistics System, National Center for Health Statistics, Centers for Disease Control and Prevention

Findings from the CDC’s National Center for Health Statistics align with this perspective. Over the past decade, there has been a dramatic increase in the co-abuse of opioids, including fentanyl, with other substances such as cocaine and psychostimulants. Importantly, these trends have evolved without a corresponding rise in overall drug use, highlighting the critical role of fentanyl and its analogs in unintentional poisonings. Of the 4,681 overdose deaths in 2011 where cocaine was present, 2,505 (or 54%) also involved opioids. By 2021, opioids contributed to 19,250 (or 79%) of the 21,371 overdose deaths involving cocaine. Similarly, of the 2,266 overdose deaths in 2011 in which psychostimulants were present, opioids were involved in just 876 cases (39%). By 2021, opioids contributed to 11,166 (or 66%) of the 21,371 overdose deaths involving psychostimulants.[3] Over this decade-long period, cocaine-related deaths involving opioids increased almost five times as quickly as those with no opioids detected, while psychostimulant-related deaths involving opioids increase more than three times as fast as those with no opioids detected.

[3] <https://www.cdc.gov/nchs/products/databriefs/db474.htm>

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The current International Classification of Diseases, 10th Revision (ICD-10) validates this shift, with a poisoning code already assigned to fentanyl-related fatalities.[4] Toxicological findings also support this change in perception. Autopsy results reveal that victims of fatal overdoses often had multiple drugs in their systems at the time of death. Post-mortem examinations reveal that victims of lethal overdoses often had multiple drugs present in their systems at the time of death. Specifically, the majority of overdose deaths involving substances such as methamphetamine, cocaine, and heroin also involved the presence of fentanyl.[5]

The recognition of fentanyl overdoses as poisonings necessitates a shift in prevention strategies and drug policy. Measures may include improved detection of fentanyl contaminations in other drugs, enhanced user education about the risks of polydrug use, and harm reduction strategies. These efforts should also consider the increasing co-involvement of opioids with substances such as cocaine and psychostimulants, and regional variations in drug use patterns. This revised perspective is a crucial step towards mitigating the impact of the opioid crisis.

[4] <https://icd.who.int/browse10/2019/en#/T40.4>

[5] <https://wonder.cdc.gov/mcd-icd10.html>



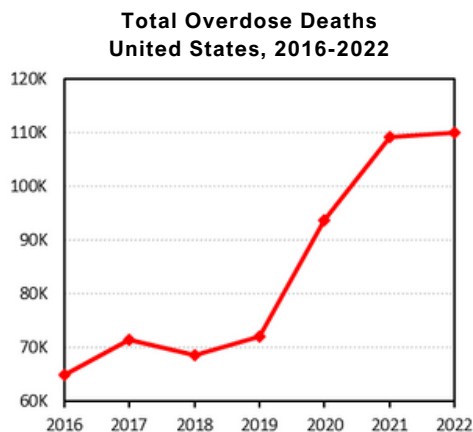
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## OVERDOSES IN AMERICA:

*Overdose deaths in the US stand at historical high levels, but in Florida there are some encouraging signs.*

The opioid crisis continues to pose an urgent public health threat in the United States, with overdose deaths climbing to new records for each of the past four years. Recently released data from the Centers for Disease Control and Prevention (CDC) underscore the severity of this crisis: in 2022 alone, over 110,000 fatal drug overdoses occurred nationwide—translating to a staggering average of more than 300 deaths every day.[6] This alarming figure extends the troubling upward trend already observed during the COVID-19 pandemic, exceeding the disturbingly high levels seen during that period.

[6] <https://www.cdc.gov/nchs/nvss/vsrr/drug-overdose-data.htm>



Source: Centers for Disease Control and Prevention



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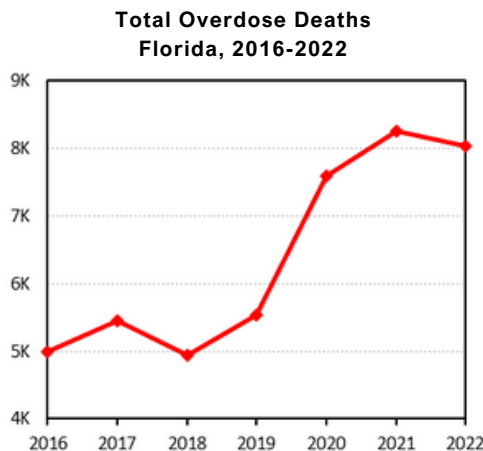


## OVERDOSES IN FLORIDA:

*Overdose deaths in the US stand at historical high levels, but in Florida there are some encouraging signs.*

In Florida, there were some encouraging signs as overdose deaths declined last year for the first time since 2018. However, despite the 2.6% yearly decline seen in 2022, the crisis remains acute, with 8,042 Florida residents losing their lives to drug overdoses in the past year—an average of 22 deaths per day.[7]

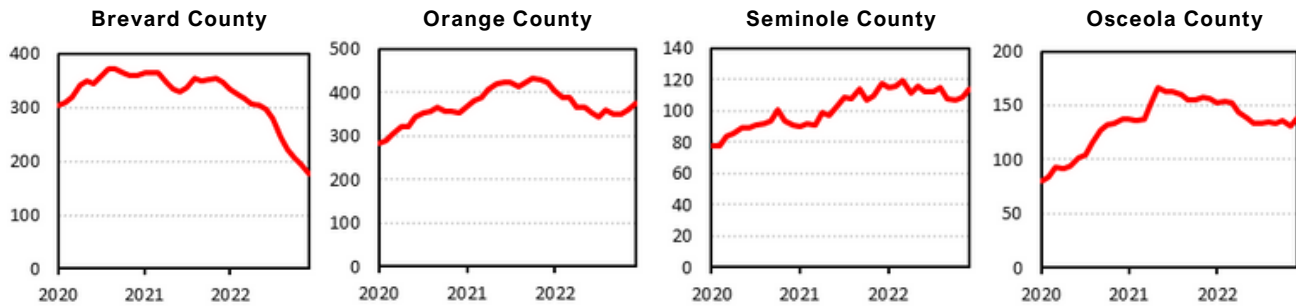
[7] Ibid.



Source: Centers for Disease Control and Prevention



**Provisional Drug Overdose Deaths (Trailing 12 Months),  
January 2020 - December 2022**



Source: Centers for Disease Control and Prevention

The data paint a varied picture for Central Florida, encompassing Brevard, Orange, Osceola, and Seminole counties. Even as these counties continue to suffer from a high number of fatalities, some tentative signs of progress are emerging. Brevard County reported a notable decrease in overdose deaths in 2022, cutting the number by over 49%. Orange and Seminole counties also saw significant, albeit smaller, reductions in the death toll, decreasing by approximately 11%. A slight decline of 3.4% was observed in Osceola County, more in line with the 3.2% decline statewide.[8]

Despite the downward trend in these counties, the problem remains severe. Over 800 Central Floridians lost their lives to overdoses in 2022, a distressingly high figure that underscores the continued urgency of the crisis. Although the reduction in deaths in some counties, likely due to the increased availability of naloxone, is encouraging, concerted efforts must continue to further alleviate the impact of the opioid crisis in Central Florida.

[8] <https://www.cdc.gov/nchs/nvss/vsrr/prov-county-drug-overdose.htm>

## FENTANYL FACTOR:

*Fentanyl remains the driver of the opioid crisis, implicated in the majority of overdose deaths.*

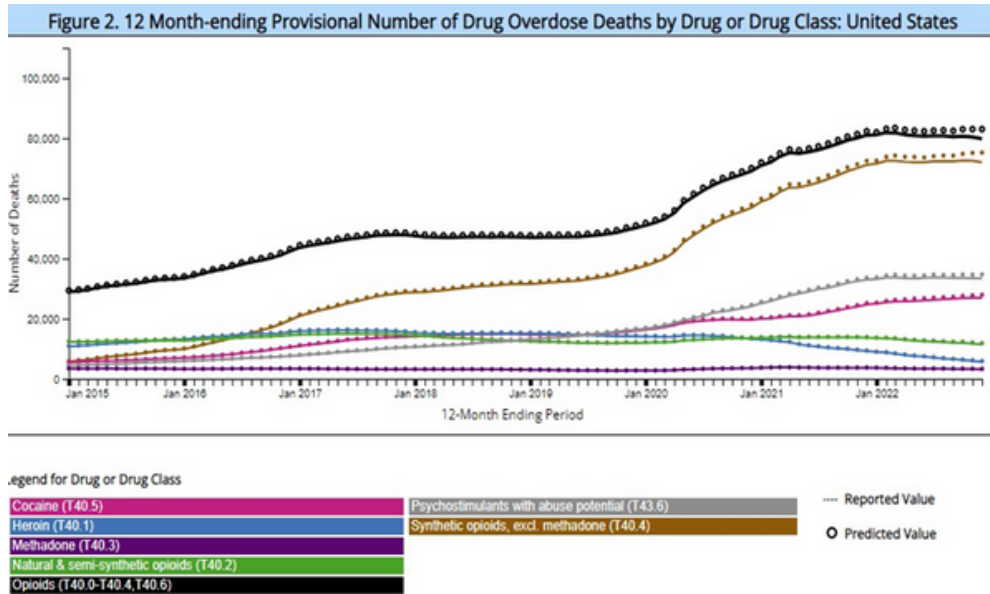
Fentanyl continues to be the dominant force in the overdose crisis, playing a role in the majority of overdose deaths.[9] Since 2013, the crisis has escalated significantly, predominantly due to the rise in synthetic opioids, particularly illicitly manufactured fentanyl. This potent substance has been a major contributor to the surge in overdose fatalities, casting a dark shadow on the national public health landscape.

The figures are daunting. Since the declaration of a national public health emergency in 2017, more than 450,000 Americans have died from drug overdoses. [10] These numbers are testament to the severity and widespread nature of the crisis. A key point to note is that two thirds of these overdose deaths are now attributable to fentanyl and other synthetic opioids, further highlighting fentanyl's decisive role in the continuing opioid crisis.[11]

[9] <https://www.cdc.gov/nchs/nvss/vsrr/drug-overdose-data.htm>

[10] Ibid.

[11] Ibid.



This trend has been accompanied by a shift in the primary agents of opioid-related harm. Prescription opioids, which were previously the main contributors to the crisis, now play a lesser role compared to synthetic opioids like fentanyl. While this does not diminish the dangers posed by misuse of prescription opioids, it does underscore the need for a strategic focus on combating the threat posed by fentanyl and similar substances.

The persistent centrality of fentanyl to the opioid crisis necessitates continued attention from policy makers, healthcare professionals, and the public. It is crucial to tackle the issue on multiple fronts, from curtailing the illicit production and distribution of fentanyl, to enhancing awareness of its dangers, and ensuring that those at risk or affected have access to effective interventions and treatments. The scale and impact of the crisis calls for sustained and comprehensive efforts to address this ongoing public health emergency.

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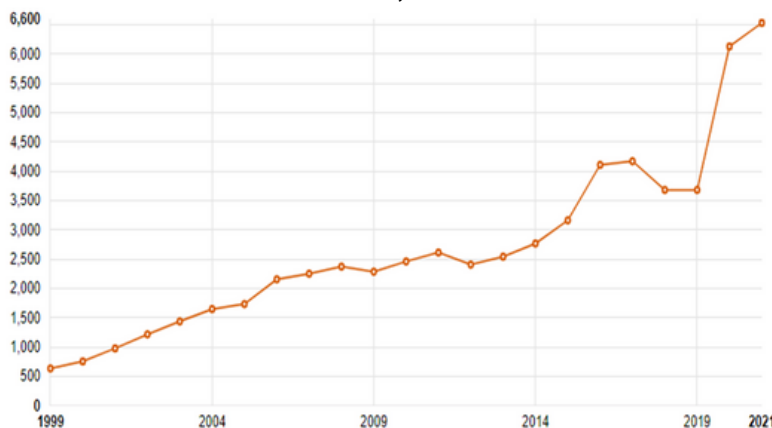
## DEATHS ARE TRENDING YOUNGER:

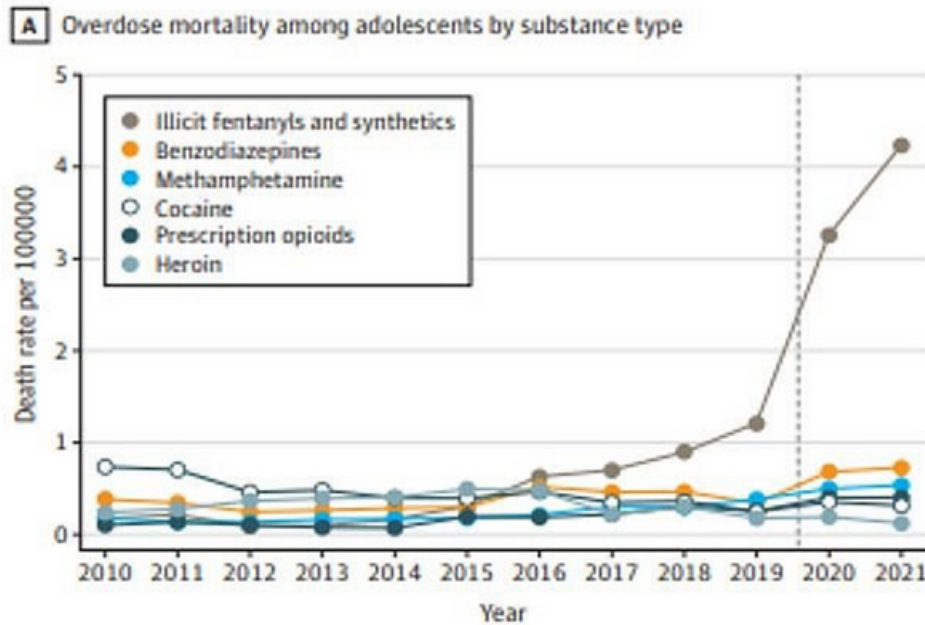
*Opioid-related deaths are affecting younger Americans in increasing numbers.*

The opioid crisis has exhibited a distressing trend of increasingly impacting younger Americans. The effects of the crisis are alarmingly pronounced among adolescents. Data reveals that fatal overdoses in the age group of 14 to 18 years old surged by an astounding 94% in 2020. This increase far outpaces the overall rise in overdose deaths in the general population, which stood at 29.5% in the same year. In 2021, the situation worsened further with a 20% rise in fatal overdoses among adolescents, nearly double the rate of increase for the overall population, which was at 11.5%.[12]

[12] <https://jamanetwork.com/journals/jama/article-abstract/2790949>

**Overdose Deaths for those Aged 0-24,  
United States, 1999 - 2021**





It is crucial to underscore that these escalating numbers do not correspond to an increase in drug-seeking behavior among these age groups.[13] Rather, the evidence points towards the contamination of the entire illicit drug supply with fentanyl as a major factor behind this trend. The prevalence of fentanyl, often mixed into other substances without users' knowledge, significantly heightens the risk of fatal overdose, particularly among adolescents experimenting with other substances for the first time.

The growing impact of the opioid crisis on younger Americans demands urgent attention and action. Strategies must be tailored to address the unique challenges and needs of this age group, and should prioritize preventive measures, early detection, and access to age-appropriate interventions and treatments. These data underline the need for concerted efforts to protect younger populations from the devastating effects of the opioid crisis.

[13] Ibid.

## M.A.T. & HARM REDUCTION ARE LEADING THE WAY:

*Medications such as naloxone and buprenorphine have proven to be useful tools in addressing the opioid crisis.*

Medications such as naloxone and buprenorphine have emerged as instrumental tools in mitigating the impact of the opioid crisis. Their use in emergency and treatment contexts has had a significant influence on the trajectory of the crisis.

Naloxone, a medication designed to rapidly reverse opioid overdose, has undoubtedly saved countless lives in recent years. Its wider availability in many communities has provided a critical safety net for individuals at risk of overdose. However, it's crucial to recognize that the successful use of naloxone may inadvertently mask the true scope of the opioid crisis.

While death totals are often used as a key indicator of the crisis's severity, these figures certainly underrepresent the actual number of opioid overdoses that occur, as many are reversed through naloxone administration.

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Accurate and comprehensive data about non-fatal overdoses, including those reversed by naloxone, is hard to come by, often due to underreporting, the inconsistency in the collection of data across different jurisdictions, the reluctance of individuals to seek medical treatment, and the lack of standardized definitions or methodologies for identifying and classifying non-fatal overdose events.[14]

On the treatment front, buprenorphine, an opioid addiction treatment medication, has faced a complex landscape. Despite regulatory changes intended to expand access to this medication, actual prescriptions of buprenorphine have not risen significantly.[15] This discrepancy suggests possible barriers to access or utilization, even in the face of policy efforts to increase its availability.

Medication-assisted treatment, which includes the use of medications like buprenorphine, has demonstrated effectiveness in preventing relapse when used consistently. These treatments combine medication with counseling and behavioral therapies to provide a more comprehensive approach to the treatment of substance use disorders.

Overall, while medications such as naloxone and buprenorphine have proven to be valuable tools in addressing the opioid crisis, it's essential to recognize the complexities surrounding their use and availability. These challenges underscore the need for ongoing efforts to optimize the use of these life-saving resources and to develop comprehensive, patient-centered approaches to treatment and prevention.

[14] <https://www.samhsa.gov/data/report/dawn-non-fatal-overdoses>

[15] <https://jamanetwork.com/journals/jama/article-abstract/2804078>





## RECOMMENDATIONS FOR SUSTAINING EFFECTIVE INTERVENTIONS:

### *Increase advocacy and education for "opioid naïve" individuals*

Given the alarming rate at which overdose deaths are occurring, particularly among younger individuals, it's crucial to educate those who have not been exposed to opioids about the risks and realities of misuse. Awareness campaigns should be targeted towards schools, colleges, and social media platforms where younger audiences can be most effectively reached.

### *Focus on mental health services in relation to opioid misuse*

The link between mental health and substance abuse cannot be overstated. Investments in mental health services, particularly those that focus on addiction counseling and treatment, should be increased. Moreover, integrated healthcare services that offer both mental health and addiction treatment may be effective in dealing with the root causes of opioid misuse.





## *Create a Regional Opioid Commission in Central Florida*

In light of the significant decrease in overdose deaths in Central Florida, a Regional Opioid Commission could consolidate these gains by promoting best practices and effective strategies. This commission could serve as a model for other regions and states, helping to identify scalable and sustainable solutions to the opioid crisis.

## *Implement a technology-based stakeholder navigation system*

Navigating the complex landscape of healthcare, addiction treatment, and social services is often overwhelming for individuals battling opioid addiction. Implementing a technology-based navigation system specifically tailored for these individuals could streamline the process of finding and accessing appropriate treatments and services. The system can help guide them through essential steps—from initial consultation and diagnosis to treatment options like medication-assisted treatments (MAT) and counseling, as well as follow-up care—ensuring a more coordinated and efficient approach to managing addiction.



## *Introduce naloxone in educational institutions (K-12, Colleges, Universities)*

Given the effectiveness of naloxone in preventing opioid-related deaths, this life-saving medication should be made widely available in educational settings. Staff and students should also receive training on how to administer it in emergency situations. This measure is especially urgent considering the increasing rates of overdose among adolescents and young adults.

## *HR training focused on managing employees with opioid misuse*

Given the societal scope of the opioid crisis, workplaces are not immune. Human resources professionals should be trained to recognize signs of opioid misuse among employees and to manage these situations in a way that aligns with best practices for harm reduction and compassionate intervention. This can include providing resources for treatment and reducing the stigma associated with seeking help for addiction.

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